

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SNT		
O.I.P.E. CLASSIFIER		49	2/3/99
FORMALITY REVIEW			

59573

2-9-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	12-15-91
2	2-16-00
3	4-18-01
4	10-18-02
5	7-15-02
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Claim	Date
Final	
Original	
51	7-15-02
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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